FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000027368 (4)

AARON BP CORPORATION

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										1 10011001 110 (811) 11	INSE NASSE NASPI	DEFIL DEFID IN		IIII UII	01 10 31 1001	
8114 S.W. 91 AVENUE Miami FL 33173				8114 S.W. 91 AVENUE MIAMI FL 33173						Dű	o not wri	TE IN THIS	SPACE			
									3. [Date Incorporated	or Qualified					
										03/24/1997		_				
2. Principal Place of Business				2a. Mailing Address						FEI Number	0 hr c	750			plied For	
21				26						65-0740759		Not Applicable				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. (Certificate of Statu	s Desired				dditional quired		
City & State				City & State					- 1	Election Campaigr	_				Мау Ве	
23					28					Trust Fund Contrib	ution		A	dded t	o Fees	
Zip	- `			<u> </u>			ountry		- 1	8. This corporation owes or has paid the current year Intangible						
24	4 25 9. Name and Address of Current			29 30			₇ —			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent						
			oi Curreili n	орган	eteo Waur		B1	Name	10. 1	Name and Adores	S OI NOW !	redistered	Agent			
	dhan, lauri						"	Ivaine								
6101 S.W. 76 STREET							82 Street Addres			O. Box Number is	Not Accept	able)				
SOUTH MIAMI FL 33143							83	 								
							_	0.0	0.5							
							84	City				FL	65	Zip (ode	
office or r	registered age	nt, or both, in	the State of	Florid	7.1508, Florida Statu a. Such change was Section 607.0505, Fl	authorize	d by	y the corpo	corporation oration's bo	submits this state pard of directors. I	ment for the hereby acc	purpose o ept the app	f chan pointme	ging it: ent as	registered registered	
SIGNATURE																
Signature, typed or printed name of registered agent at 12. OFFICERS AND D								eni signature re		einstaling) DDITIONS/CHANG	ES TO DE	DATE) DIRE	CTOR	S IN 12	
TITLE	D	OIT	CENS MAD D	mile C	DELETE	1.1 T		T		DDITIONOTOTIANO	20 10 011	TOLITO AIVE			Addition	
NAME		, naval je)			1.2 N		1						gs		
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TITLE	D	. 00170			☐ DELETE	2.17		31-2Ir	**	··			□ Cr	ande	Addition	
NAME	_	, NAVAL SI	D			2.2 N		-								
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CITY-ST-ZIP	MIAMI FL) <u>C</u>					ST-ZIP								
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NAME		, VIRGINIA				3.2 N								•-		
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NAME	[4.21								-		
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CITY-ST-ZIP	}							iT-7/P								
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

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